PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004    0802469													
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAT (Column 1) (Column 2) TYPE OR SMALL ENTITY OR SMALL ENTITY											R THAN		
T	OT/1 CLAIM	S	12					RATE	FEE	7	RATE	FEE	
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC F		0	R BASIC FE	,	
T	DTAL CHARGE	ABLE CLAIMS	/2 minus 20=		•			X\$ 25	383		- X\$50=	110	
IN	DEPENDENT (	CLAIMS	2 minus 3 =					X+08=	-	OF	XIE	1	
М	ULTIPLE DEPE	NDENT CLAIM						145	+	7	250	1	
•	the difference	e in column 1 is	TOTAL	-	JOF	`							
*If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II										JOF		<u> </u>	
	2056	(Column 1)	-unchive	(Column 2)				SMALL ENTITY		OR		SMALL ENTITY	
ENT A		CLAMS REMAINING AFTER AMENDMENT		PREVIO PAID F	ER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	]	RATE .		
AMENDMENT	Total	. 10	Minus	- 20	)	-/		X\$ 25=		ÓЯ	X\$50=	1	
ME	Independent	. 2	Minus	- 3		<u> </u>		X100=		OR	X200=	7	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+180-	1-/	1		/	
									-	┫┈	TOTAL		
	7.20.00	(Column 1)		(Colum	a 21	(Column 3)		ADDIT. FEE	<u> </u>	1 <sub>0x</sub>	ADDIT. FEE	<u> </u>	
<b>a</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	• 14	Minus	- 20	2	= (		X\$ 25=		OR	X\$50 <sub>2</sub>		
AMENDMENT	Independent	. 3	Minus	-3		=	+	X100=			X200=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.100					
	•							TOTAL	·	OB	TOTAL		
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		. (Column		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER, AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ے ا	Total	•	Minus	**		T T		X\$ 25=		OR	X\$50=		
	independent	•	Minus	***		e	t	X100=		Ì	X200=		
٠,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			
	the eather in eater	na t la lace Man <del>d</del>	anto la actio		° In au	<u> </u>	Ĺ	+180=		OR	+360=		
II	the Highest Nur	nn 1 is less than the ober Previously Pal	d For IN THIS	S SPACE IS N	ess then	20, enter "20."	A	. TOTAL DDIT. FEE		OR,	TOTAL VODIT. FEE		
		mber Previously Paid her Previously Paid					town	RATE					